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Bib Data Sheet

CONFIRMATION NO. 9020

<b>SERIAL NUMBER</b> 09/863,268	<b>FILING OR 371(c) DATE</b> 05/24/2001 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3623	<b>ATTORNEY DOCKET NO.</b> ARC920010012US1
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## APPLICANTS

Reiner Kraft, Gilroy, CA;  
 Joann Ruvolo, San Jose, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

09/768,458 PC 5/8/07

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

-none- PC 5/8/07

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

07/24/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 27	<b>INDEPENDENT CLAIMS</b> 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>PC</i> Initials <i>PC</i>				

## ADDRESS

66932

## TITLE

BUSINESS METHOD OF PROVIDING A CHANNEL FOR DELIVERING AND DISTRIBUTING EVENTS BASED ON A  
 SUBSCRIPTION MODEL FOR SERVICE PROVIDERS TO ENHANCE SALES OPPORTUNITIES

<b>FILING FEE RECEIVED</b> 966	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit



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CONFIRMATION NO. 9020

<b>SERIAL NUMBER</b> 09/863,268	<b>FILING DATE</b> 05/24/2001 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> <del>2106</del> 3623	<b>ATTORNEY DOCKET NO.</b>
<b>APPLICANTS</b> Reiner Kraft, Gilroy, CA; Joann Ruvalo, San Jose, CA;				
<b>** CONTINUING DATA *****</b> -none- PC				
<b>** FOREIGN APPLICATIONS *****</b> -none- PC				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 07/24/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <input type="checkbox"/> Allowance		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 27
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>PC</i>		<b>INDEPENDENT CLAIMS</b> 4		
<b>ADDRESS</b> Lacasse & Associates Randy W. Lacasse, Esq. Suite 806 2001 Jefferson Davis Highway Arlington, VA 22202				
<b>TITLE</b> Business method of providing a channel for delivering and distributing events based on a subscription model for service providers to enhance sales opportunities				
<b>FILING FEE RECEIVED</b> 916	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	